JEWISH HOME AND CARE CENTER

1414 N PROSPECT AVE

MILWAUKEE 53202 Phone: (414) 276-2627		Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and Staffed (12/31/04):	232	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	232	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	194	Average Daily Census:	153

Services Provided to Non-Residents	Age, Gender, and Primary Di	agnosis	of Residents (12/31/04)	Length of Stay (12/31/04) %	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	36.1
Supp. Home Care-Personal Care	No					1 - 4 Years	28.9
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.7	More Than 4 Years	35.1
Day Services	Yes	Mental Illness (Org./Psy)	38.7	65 - 74	8.8		
Respite Care	Yes	Mental Illness (Other)	1.0	75 - 84	29.9		100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	43.8	*******	******
Adult Day Health Care	Yes	Para-, Quadra-, Hemiplegic	1.5	95 & Over	10.8	Full-Time Equivale	nt
Congregate Meals Yes		Cancer		Nursing Staff per 100 R	aff per 100 Residents		
Home Delivered Meals	Yes	Fractures	5.2		100.0	(12/31/04)	
Other Meals	Yes	Cardiovascular	10.8	65 & Over	93.3		
Transportation	No	Cerebrovascular	7.2			RNs	11.9
Referral Service	Yes	Diabetes	0.0	Gender	ક	LPNs	10.4
Other Services	Yes	Respiratory	1.5			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	33.0	Male	24.7	Aides, & Orderlies	53.2
Mentally Ill	No			Female	75.3		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		
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Method of Reimbursement

		edicare itle 18			edicaio itle 19		Other		Private Pay		Family Care			Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	8	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	 16	16.0	151	0	0.0	0	2	3.6	206	0	0.0	0	0	0.0	0	18	9.3
Skilled Care	13	100.0	266	84	84.0	129	4	100.0	144	53	96.4	197	22	100.0	129	0	0.0	0	176	90.7
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	i 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	-	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	13	100.0		100	100.0		4	100.0		55	100.0		22	100.0		0	0.0		194	100.0

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Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services,	and Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	10.9	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	1.0		52.6	46.4	194
Other Nursing Homes	3.1	Dressing	8.8		63.9	27.3	194
Acute Care Hospitals	79.3	Transferring	22.7		50.5	26.8	194
Psych. HospMR/DD Facilities	0.0	Toilet Use	15.5		51.5	33.0	194
Rehabilitation Hospitals	1.6	Eating	42.3		45.4	12.4	194
Other Locations	5.2	*******	******	*****	******	********	******
Total Number of Admissions	193	Continence		%	Special Treat	ments	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	7.7	Receiving F	Respiratory Care	10.3
Private Home/No Home Health	2.6	Occ/Freq. Incontiner	nt of Bladder	46.9	Receiving T	Tracheostomy Care	1.5
Private Home/With Home Health	38.2	Occ/Freq. Incontiner	nt of Bowel	42.8	Receiving S	Suctioning	1.5
Other Nursing Homes	5.2				Receiving C	Ostomy Care	2.6
Acute Care Hospitals	20.4	Mobility			Receiving T	Tube Feeding	5.2
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	1.0	Receiving M	Mechanically Altered Diets	17.5
Rehabilitation Hospitals	0.0						
Other Locations	11.5	Skin Care			Other Resider	nt Characteristics	
Deaths	22.0	With Pressure Sores		6.7	Have Advanc	ce Directives	100.0
Total Number of Discharges		With Rashes		8.8	Medications		
(Including Deaths)	191				Receiving F	Psychoactive Drugs	67.5

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	This Nonprofit			00+	Ski	lled	Al	1
	Facility	Facility Peer G		Peer	Group	Peer Group		Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	65.9	87.4	0.75	88.9	0.74	87.3	0.76	88.8	0.74
Current Residents from In-County	85.1	86.8	0.98	83.3	1.02	85.8	0.99	77.4	1.10
Admissions from In-County, Still Residing	31.1	21.8	1.43	25.0	1.24	20.1	1.55	19.4	1.60
Admissions/Average Daily Census	126.1	159.1	0.79	116.5	1.08	173.5	0.73	146.5	0.86
Discharges/Average Daily Census	124.8	159.6	0.78	119.3	1.05	174.4	0.72	148.0	0.84
Discharges To Private Residence/Average Daily Census	51.0	63.2	0.81	41.9	1.22	70.3	0.73	66.9	0.76
Residents Receiving Skilled Care	100	96.1	1.04	95.1	1.05	95.8	1.04	89.9	1.11
Residents Aged 65 and Older	93.3	96.5	0.97	91.8	1.02	90.7	1.03	87.9	1.06
Title 19 (Medicaid) Funded Residents	51.5	50.4	1.02	64.3	0.80	56.7	0.91	66.1	0.78
Private Pay Funded Residents	28.4	33.2	0.85	19.3	1.47	23.3	1.22	20.6	1.38
Developmentally Disabled Residents	0.0	0.5	0.00	0.8	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	39.7	33.9	1.17	39.0	1.02	32.5	1.22	33.6	1.18
General Medical Service Residents	33.0	26.1	1.26	21.2	1.56	24.0	1.37	21.1	1.57
Impaired ADL (Mean)	55.6	51.2	1.09	50.4	1.10	51.7	1.07	49.4	1.12
Psychological Problems	67.5	62.3	1.08	56.9	1.19	56.2	1.20	57.7	1.17
Nursing Care Required (Mean)	6.8	7.1	0.96	8.1	0.84	7.7	0.88	7.4	0.91